

Application No. (if known): 10/664,089

Attorney Docket No.: 03886/0200058-US0

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Fee Transmittal (1 page)

Amendment Transmittal (1 page)

Amendment (8 pages)

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Total Amount of Payment (1980).  Fees pursuant to the Consolidated Appropriations Act 2008 (P.R. 4818).  FEE TRANSMITTAL FOR FY 2009  Application Number 10/664 (089-Conf. #3720)  First Named Inventor Hirroyud Sekiguchi Examiner Name R. M. Mancho  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (glesse identify):  Deposit Account Deposit Account Name R. M. Mancho  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) included below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Examination of the feet of the filing fee Samul Entity  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Application Type Fee IS Fee I	10 TO	Under the Panenwork Reduction Ac	t of 1995 pr	nerson are i	required to	raraaad ta	J.S. Patent	and Trade	mark Of	fice; U.S. DE	06/30/2010. PARTMENT (	O/SB/17 (10-08 OMB 0651-003: OF COMMERCE
FEE TRANSMITTAL FOR FY 2009  Application Number 10/664/089-Conf. #3720 Filing Date September 17, 2003 First Named Inventor First Named Inventor Examiner Name R. M. Mancho Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. 03886/0200058-USO  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 04-0100 Deposit Account Name Darby & Darby P.C.  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Tee(s) and 1.17  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES Application Type Fee (\$) Fee (	J7											
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Applicant claims small entity status. See 37 CFR 1.27  And Unit 3664  Art Unit 3664  METHOD OF PAYMENT (the ck all that apply)  Check Credit Card Money Order None Other (plesse identify):  Deposit Account Deposit Account Number 04-0100 Deposit Account Number Darby & Darby P.C.  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge any additional fee(s) or underpayments of Charge fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or underpayments of X Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  SEARCH FEES  SEARCH FEES  EXAMINATION FEES  FILING FEES  SEARCH FEES  EXAMINATION FEES  FILING FEES  SEARCH FEES  EXAMINATION FEES  Small Entity  Application Type  Fee (5) Fee	ı				·g = u.u			Hiroy	<del></del>			
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Check Credit Card Money Order None Other (please identify):    Deposit Account   Deposit Account Number   O4-0100   Deposit Account Name: Darby & Darby P.C.	Ŀ	TOTAL AMOUNT OF PAYMENT (\$) 0.00				Attorney Docket No. 03886/0			6/020005	8-US0		
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Provisional 220 110 0 0 0 0 0  2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  52 26 .  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims 5 -20 or HP 0 x 52.00 = 0.00 HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filling surcharge):  SUBMITTED BY Signature  Registration No. (Attorney/Agent) 59,233 Telephone (212) 527-7700	ı											
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims      Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims   5	ı					•						<del>.</del>
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Name (Print/Type) James C. Signor U Date August 5, 2009	Si	gnature Cont	12	7_				59,233	3 Te	lephone	(212) 52	7-7700
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Application	n No.	Filing I	Date		Examiner		Art Unit
10/664,089-Co	nf. #3720	September	17, 2003		R. M. Mancho	<u> </u>	3664
Applicant(s): Hiro	yuki Sekiguchi						
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	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		Rate		
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Vames C. Signo					Dated:	August 5	5, 2009
Attorney/Agent	Reg. No.: 59,	233					
DARBY & DARI P.O. Box 770 Church Street S New York, New (212) 527-7700	Station York 10008-0	0770					
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